

COMPLIANCE PACKAGING

ISSUES AND CONSIDERATIONS PART II

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IN THE JULY-AUGUST ISSUE OF PHARMACY CONNECTION, WE PUBLISHED AN ARTICLE DISCUSSING THE ADHERENCE TO LABELLING AND RECORD KEEPING REQUIREMENTS ASSOCIATED WITH DISPENSING MEDICATION IN COMPLIANCE PACKAGING.

This article focuses on developing a comprehensive compliance program that utilizes defined treatment objectives, professional collaboration and compliance monitoring to achieve and document positive patient outcomes.

The rationale behind dispensing medications in compliance packaging is to assist patients with self administration of their medication. Compliance packaging is one tool that can be used in treating certain disease states, addressing cognitive impairment and/or managing a large number of medications. In all cases, the basic objective is to achieve adherence to a prescribed administration schedule. Meeting this objective will benefit patient well-being and reduce costs to the health care system. The pharmacist as an effective, front line health care provider, has an important role to play.

The potential benefits of development and implementation of a compliance program include:

- effective treatment of a condition(s)
- establishing optimal dosing
- incorporation of all medications (prescription and non-prescription)
- more effective communications between health professionals and patients
- providing clarity and transparency of treatment expectations and objectives of the program. Opportunity to define and document outcome indicators and benefits

- maximizing drug utilization while minimizing waste
- simplifying compliance with labelling and record keeping requirements
- minimizing need to consult physician for routine administrative matters
- appropriate handling and disposal of confidential material

DEFINING OBJECTIVES AND INDICATORS OF THE COMPLIANCE PROGRAM:

It is important to define the program objectives and indicators to enable the pharmacy to demonstrate the impact on the patient’s condition(s), document the value and effectiveness of the compliance program and decide whether other actions are indicated. Program objectives and related indicators can be determined based on the circumstances that prompted the need for compliance packaging.

INTRODUCING A PATIENT TO A COMPLIANCE PROGRAM:

When first introducing compliance packaging as an option, it is beneficial to have a discussion with the patient/agent about the potential benefits and to explain some of the safety concerns. This discussion may be initiated at the time of a medication review (e.g. Meds-Check).

Two items which should be discussed are:

- Some medications may require dosage adjustment as the dose originally prescribed was based on inconsistent ingestion. Discuss potential signs and symptoms that indicate that a dose adjustment may be needed, when/how to notify the pharmacist of any problems and how any dose modifications or new medications will be managed.
- As compliance packs are not considered “child safe”, it is

advisable to store them in a secure location (to children, some packs may look like candy).

A “take back” component may be started in which the pharmacy collects the old pack when providing the new one. This will allow the pharmacist an opportunity to assess compliance as well as control over the safe disposal of unused medication and confidential health records.

The dispensing of medications in compliance packs, by itself, does not ensure adherence. An effective program also requires regular communication with the primary treating physician, the patient and any agents to ensure that treatment indicators are being met and outcomes achieved. Evaluate your compliance program regularly. It should be comprehensive yet easy to follow for everyone involved. **Re**

OBJECTIVE	POTENTIAL INDICATOR
Assisting with non-compliance	<ul style="list-style-type: none"> • number of weeks with stabilized dosage • time frame required for patient to achieve a stabilized dose • patient/agent or physician feedback
Managing a disease state	<ul style="list-style-type: none"> • control/stabilization of disease state • number of dose changes made • feedback from MD and patient/agent
Addressing cognitive impairment	<ul style="list-style-type: none"> • frequency of refills of prn meds • time that patient remains independent • time spent or frequency of necessary communication with patient/agent • number of interventions due to compliance monitoring • change to number of days supply provided • patient/agent feedback
Documenting collaboration	<ul style="list-style-type: none"> • attaining access to patient test results from physician • number of instances requiring contact with physician